

14461  
06/19/03  
U.S.  
PTO

**UTILITY  
PATENT APPLICATION  
TRANSMITTAL**

Our Docket No.: 14445.01  
First Named Inventor: Matthew P. Dugas  
Title: Optical Path for a Thermal-Assist and Magnetic Recording Head  
Express Mail No.: EV324255873US

14772  
10/6/03  
PTO  
56  
06/19/03

**ADDRESS TO:**

**Mail Stop PATENT APPLICATION**  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**APPLICATION ELEMENTS**

1.  Fee Calculation Sheet  
(Submit an original and a duplicate for fee processing)
2.  Applicant claims small entity status
3.  Specification Total Pages: 13
  - Descriptive title of the invention
  - Cross Reference to Related Applications
  - Statement Re: Fed. Sponsored R&D
  - Reference to Microfiche Appendix
  - Background of the Invention
  - Brief Summary of the Invention
  - Brief Description of the Drawings
  - Detailed Description
  - Claims
  - Abstract of the Disclosure
4.  Drawings (35 U.S.C. 113) Total Sheets: 10
5.  Oath or Declaration Total Pages:
  - a.  Newly Executed (original or copy)
  - b.  Copy from a prior application (37 C.F.R. 1.63(d))  
(for continuation/divisional with Box 19 completed)
    - i.  **DELETION OF INVENTORS**  
Signed statement attached deleting inventor(s) named in the prior application (37 C.F.R. 1.63(d)(2) and 1.33(b))
6.  Application Data Sheet (37 C.F.R. 1.76)
7.  CD-ROM or CD-R in duplicate,
8.  Large table or Computer Program (Appendix)  
Nucleotide and/or Amino Acid Sequence Submission  
(If applicable, all necessary)
  - a.  Computer Readable Form (CRF)
  - b.  Specification Sequence Listing on:
    - i.  CD-ROM or CD-R (2 copies); or
    - ii.  paper
  - c.  Statement verifying identity of above copies

**ACCOMPANYING APPLICATION PARTS**

9.  Certification Under 35 U.S.C. 122(b)(2)(B)(i)
10.  Assignment Papers (cover sheet & document(s))
11.  37 C.F.R. 3.73(b) Submission
12.  Power of Attorney
13.  Information Disclosure Statement  
(with Copies of Citations as necessary)
14.  Preliminary Amendment Total Pages:
15.  Certified Copy of Priority document(s)  
(if foreign priority is claimed)
16.  English Translation Document (if applicable)
17.  Return Receipt Postcard  
(Should be specifically itemized)
18.  Other
  - Check No. \_\_\_\_\_ for \$ \_\_\_\_\_
  - Copy of Power of Attorney from prior application
  - 
  - 
  - 
  -

**CONTINUATION APPLICATIONS**

19. If a CONTINUATION APPLICATION, check appropriate box and supply the requisite information:

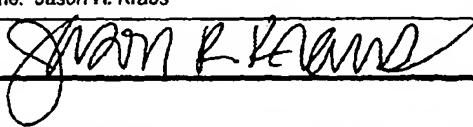
Continuation  
 Division  
 Continuation-in-Part (CIP)

**of PRIOR APPLICATION**

No. \_\_\_\_\_, filed \_\_\_\_\_  
and also claims priority from \_\_\_\_\_, dated \_\_\_\_\_

For CONTINUATION or DIVISIONAL APPLICATIONS: The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 5b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference.

**CORRESPONDENCE ADDRESS**

ADDRESS	CUSTOMER NUMBER  *25763* 25763 PATENT TRADEMARK OFFICE		
TELEPHONE	612-340-5617	FAX	612-340-8856
Attorney Name: Jason R. Kraus		Reg. No. 42,765	
Signature: 		Date: June 19, 2003	

30/6/90  
U.S.  
PTO

**APPLICATION  
FEE TRANSMITTAL SHEET  
(FY 2003)**

Complete if Known			
Application No.			Unknown
Filing Date			Herewith
First Named Inventor			Matthew P. Dugas
Group Art Unit			Unknown
Examiner Name			Unknown
Atty. Docket Number			14445.01

METHOD OF PAYMENT (Check One)				FEE CALCULATION (Continued)																																																																																																																																															
<p>1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:            Deposit Account No.: 04-1420            Deposit Account Name: DORSEY &amp; WHITNEY LLP</p> <p><input checked="" type="checkbox"/> Charge any additional fee required under 37 C.F.R. 1.16 and 1.17  <input checked="" type="checkbox"/> Applicant claims small entity status (see 37 C.F.R. 1.27)</p> <p>2. <input checked="" type="checkbox"/> Check Enclosed</p>				<p style="text-align: center;"><b>FEE CALCULATION</b></p> <p><b>1. BASIC FILING FEE</b></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Large Entity Fee</th> <th style="text-align: left;">Small Entity Fee</th> <th colspan="2" style="text-align: left;">Fee Description</th> </tr> </thead> <tbody> <tr> <td>160</td> <td>80</td> <td colspan="2"><input type="checkbox"/> Provisional Filing Fee</td> </tr> <tr> <td>750</td> <td>375</td> <td colspan="2"><input checked="" type="checkbox"/> Utility Filing Fee</td> </tr> <tr> <td>330</td> <td>165</td> <td colspan="2"><input type="checkbox"/> Design Filing Fee</td> </tr> <tr> <td>750</td> <td>375</td> <td colspan="2"><input type="checkbox"/> Reissue Filing Fee</td> </tr> <tr> <td align="right" colspan="2"><b>Subtotal (1)</b></td> <td align="right" colspan="2">\$375.00</td> </tr> </tbody> </table> <p><b>2. EXTRA* CLAIM FEES</b></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Number of Claims</th> <th style="text-align: left;">Prior to 20</th> <th style="text-align: left;">Extra</th> <th style="text-align: left;">Fee from Below:</th> <th style="text-align: left;">Fee Paid:</th> </tr> </thead> <tbody> <tr> <td>Total 20</td> <td>- 20</td> <td>= 0</td> <td>x \$9.00</td> <td>= \$0.00</td> </tr> <tr> <td>Indep. 3</td> <td>- 3</td> <td>= 0</td> <td>x \$42.00</td> <td>= \$0.00</td> </tr> <tr> <td>Multiple Dependent Claims</td> <td></td> <td>=</td> <td>x</td> <td>=</td> </tr> <tr> <td align="right" colspan="5"><b>Subtotal (2)</b></td> </tr> </tbody> </table> <p>*Calculation of Extra Claim Fees</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Large Entity Fee</th> <th style="text-align: left;">Small Entity Fee</th> <th colspan="2" style="text-align: left;">Fee Description</th> </tr> </thead> <tbody> <tr> <td>18</td> <td>9</td> <td colspan="2">Claims in excess of 20</td> </tr> <tr> <td>84</td> <td>42</td> <td colspan="2">Independent claims in excess of 3</td> </tr> <tr> <td>280</td> <td>140</td> <td colspan="2">Multiple dependent Claim</td> </tr> <tr> <td>84</td> <td>42</td> <td colspan="2">Reissue independent claims over original patent</td> </tr> <tr> <td>18</td> <td>9</td> <td colspan="2">Reissue claims in excess of 20 and over original patent</td> </tr> </tbody> </table>				Large Entity Fee	Small Entity Fee	Fee Description		160	80	<input type="checkbox"/> Provisional Filing Fee		750	375	<input checked="" type="checkbox"/> Utility Filing Fee		330	165	<input type="checkbox"/> Design Filing Fee		750	375	<input type="checkbox"/> Reissue Filing Fee		<b>Subtotal (1)</b>		\$375.00		Number of Claims	Prior to 20	Extra	Fee from Below:	Fee Paid:	Total 20	- 20	= 0	x \$9.00	= \$0.00	Indep. 3	- 3	= 0	x \$42.00	= \$0.00	Multiple Dependent Claims		=	x	=	<b>Subtotal (2)</b>					Large Entity Fee	Small Entity Fee	Fee Description		18	9	Claims in excess of 20		84	42	Independent claims in excess of 3		280	140	Multiple dependent Claim		84	42	Reissue independent claims over original patent		18	9	Reissue claims in excess of 20 and over original patent																																																																				
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Submitted by:

CUSTOMER NUMBER	DORSEY & WHITNEY LLP	Intellectual Property Department Suite 1500, 50 South Sixth Street Minneapolis, MN 55402
25763		Phone No.: 612-340-5617    Fax No.: 612-340-8856
Name: Jason R. Kraus		Reg. No.: 42,765    Date: June 19, 2003
Signature: 